or in an Application Data Sheet under 37 CFR 1.76: of prior application No.: __ Continuation in part (CIP) **Divisional** Continuation Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS + Correspondence address below Customer Number or Bar Code Label and the second second second second Robert M. Olgin / Mark C. Payne Name P.O. Box 608 2899 McMillan Road **Address** Zip Code 93406-0608 State CA San Luis Obispo City Fax same (805)5<u>43</u>-2396 Telephone Country United States

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Robert M. Olgin / Mark C. Payne

Name (Print/Type)

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C.D. collection of information up ass it displays a valid OMB control number. Under the Paperwork Reduction Act of 1996, no persons are required to respond to a Complete if Known **FEE TRANSMITTAL** Application Number Filing Date for FY 2003 ROBERT M. OLGIN / MARK C. PAYNE First Named Inventor Patent fees are subject to annual revision. Examiner Name Applicant claims small entity status. See 37 CFR 1.27 Group Art Unit TOTAL AMOUNT OF PAYMENT (\$) 385.00 Attorney Ducket No. FEE CALCULATION (continued) METHOD OF PAYMENT (check all that apply) 3. ADDITIONAL FEES Check Card Card Money Other Alone Large Entity Small Entity Discussif Accusin: Fee Paid Fee Fee Fee (\$) Code (\$) Fee Description Deposit Account Surcharge - late filing fee or oath *30 205 65 105 Number Surcharge - late provis onal filing fee or cover shee: Daposit 5C 227 25 Account Name The Commissioner is sufficient to: (check at that apply) Non-English specification 139 130 139 130 Credit any overpayments Charge fee(s) indicated below For filing a request for ex parte recommination 147 2,520 147 2 520 Charge any additional fee(s) during the pandency of this application Requesting publication of SIR prior to Exeminer action 112 920 920* 112 Charge fee(s) indicated below, except for the filing fee Requesting publication of SIR after Examiner action to the above identified deposit account 113 1,840"|113 1,840" FEE CALCULATION Extension for reply within first month 215 55 110 115 1. BASIC FILING FEE Extension for reply within second month 21€ 200 400 Large Entity | Small Entity Extension for reply within third month 217 480 920 Fee Description Fee Paid Code (\$) Extension for reply within fourth month Code (\$) 118 1.440 219 720 1385.00 201 370 Ubi-ty filing fee 101 740 228 980 128 1.960 Extension for reply anihun fills mouth Design filing fee 208 165 106 330 Notice of Appeal 320 219 160 119 207 255 Plant Ming fee 107 510 220 160 Fitting a brief in support of an appeal 320 Reissue filing fee 208 379 108 740 Request for oral hearing 280 221 143 121 Provisional filing fee 14 100 214 Patrion to institute a public use proceeding 1,510 138 1.5"0 138 SUBTOTAL (1) (\$) 385.00 240 Petition to revive - unavoidable 14C 110 35 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Pasing to revive - unintentional 241 640 1 280 Fee Paid 142 1,280 Utility issue fee (or reissue) 242 Extra Claims below 143 489 243 23U Design issue fee ľχ -20** = Tetal Claims Plant is sue fee Independent 620 244 310 . 3** = X 144 Glaurs Petitions to the Commissioner 122 130 Multiple Dependent 122 130 Processing fee under 37 CFR 1.*7(q) 123 50 123 50 Submission of Information Disclosure Stimi Large Entity | Small Entity 160 126 180 126 Fee Description Foe Fee Code (\$) Recording each patent assignment per property (times number of properties) Foo Code (8) 40 581 40 581 Claims in excess of 20 9 203 103 18 Filling a summission after final resculion (37 CFQ § 1.129(e)) 146 740 246 370 independent claims in excess of 3 42 102 84 202 Multiple dependent dam if not paid 104 260 204 140 For each additional invention to be examined (37 CFR § 1.129(b)) 149 740 249 373 ** Relssue independent claims 109 84 209 42 over original paters Request for Continued Examination (RCE) 178 740 279 370 " Reissue claims in excess of 20 110 18 210 Ç Request for expedited examination and over origina palers. 169 900 160 800 of a design apprication (\$) 385.00 Other fee (specify) SUBTOTAL (2) (\$) SUBTOTAL (3) Reduced by Basic Filing Fee Paid ""er number previously paid, if groater; For Roissues, see above Complete 9 on SUBMITTED BY Registresion No. Telephone (805) 543-2396 R bert M. Olgin / MARK C. PAYNE Heme (PartiType) í loto depo Signature

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